

April 16, 2020

The Honorable Alex M. Azar II
Secretary
Department of Health and Human Services
200 Independence Avenue, SW
Washington, DC 20201

The Honorable Seema Verma, M.P.H.
Administrator
Centers for Medicare & Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244

Dear Secretary Azar and Administrator Verma:

In light of the ongoing COVID-19 pandemic, we are writing to request that you build upon the steps taken in your recent interim final rule with comment period (IFC) by making CDC-recognized virtual Diabetes Prevention Program (DPP) providers eligible for reimbursement in the Medicare DPP (MDPP) expanded model. We continue to strongly support permanent eligibility for these providers, who have the potential to dramatically expand access to beneficiaries in need, and we urge you to ensure their eligibility for at least the duration of the COVID-19 public health emergency. This step would both enable access for millions of eligible beneficiaries and provide key foundational data on the effectiveness and integrity of virtual programs within the MDPP.

According to the CDC and emerging research from across the globe, older individuals and those suffering from serious medical conditions, such as diabetes, are at a higher risk of experiencing severe illness, and even death, after contracting COVID-19. While all Americans should adhere to the instructions of health professionals and practice social distancing, these directives are all the more important for at-risk populations, including those whom the MDPP aims to serve.

Even before this pandemic began to spread in the United States, many Medicare beneficiaries faced considerable access challenges that prevented them from participating in this potentially life-saving program. The COVID-19 pandemic, however, has exacerbated those gaps. In-person sessions risk life-threatening viral exposure, and yet beneficiaries cannot readily turn to virtual programs as a viable alternative, given persistent reimbursement barriers. While CMS's recent IFC took an important step forward in recognizing the value of certain types of virtual sessions from a subsection of providers, the parameters outlined in the rule create barriers to entry for many high-quality virtual providers and potential new participants, in addition to substantially

constraining options for beneficiaries currently participating in the program. In contrast with a number of other flexibilities included in the IFC and waivers released by CMS, which leverage innovative technological tools to improve access and care quality, the agency's temporary policy changes for the MDPP leave significant opportunities for further development and enhancement.

The COVID-19 public health emergency exemplifies the importance of integrating virtual health technology solutions into our healthcare system on a sustainable, long-term basis, and we will continue to work to ensure that CDC-recognized virtual providers are full participants in the MDPP expanded model. In the near term, however, we ask that you protect at-risk populations and preserve and bolster access to a proven program by allowing for robust and meaningful virtual provider reimbursement eligibility during this public health emergency.

Sincerely,

Tim Scott
United States Senator

Mark R. Warner
United States Senator

Cindy Hyde-Smith
United States Senator

Gary C. Peters
United States Senator

Roger F. Wicker
United States Senator

Jeanne Shaheen
United States Senator

Kevin Cramer
United States Senator

Tina Smith
United States Senator

Joni K. Ernst
United States Senator

Kyrsten Sinema
United States Senator

Shelley Moore Capito
United States Senator

Martha McSally
United States Senator